



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

ATTORNEY DOCKET NO.: AUS919970560US2

In re Application of: **DANIELS, ET AL.**

Confirmation No. **7036**

Serial No.: **10/054,184**

Examiner: **UNKNOWN**

Filed: **January 22, 2002**

Art Unit: **UNKNOWN**

Customer No. 28722

**For: DATA PROCESSING SYSTEM AND
METHOD INCLUDED WITHIN AN
OSCILLOSCOPE FOR INDEPENDENTLY
TESTING AN INPUT SIGNAL**

REQUEST FOR REFUND

Commissioner for Patents
Mail Stop Petition
P.O. Box 1450
Alexandria, VA 22313-1450

RECEIVED

SEP 03 2003

OFFICE OF PETITIONS

Sir:

Applicant respectfully requests a refund in the amount of \$410, for the foregoing reasons.

CERTIFICATE OF MAILING

37 C.F.R. § 1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date below.

Date _____

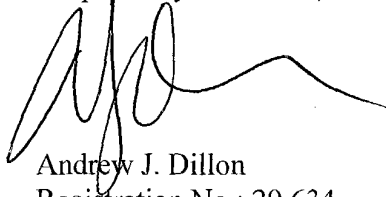
8/27/03

Signature of Annie Zoller

On July 21, 2003, Applicant submitted a Petition for a Two Month Extension of Time in conjunction with a Response to Correct Application Papers. Unfortunately, after filing the aforementioned documents, it was noted the deadline to respond was in 2002. Thus, an extension was unnecessary pending abandonment of the application for failure to timely file a Response to Correct Application Papers. Applicant respectfully requests consideration of the attached Petition to Revive Unintentionally Abandoned Application and the fee in the amount of \$1,300.

In view of the foregoing reasons, a request for refund would be greatly appreciated.

Respectfully submitted,



Andrew J. Dillon
Registration No.: 29,634
BRACEWELL & PATTERSON, L.L.P.
111 Congress Avenue, Suite 2300
Austin, Texas 78701
512-472-7800
ATTORNEY FOR APPLICANT(S)

RECEIVED

SEP 03 2003

OFFICE OF PETITIONS

RAM Fee History
Query
Revenue Accounting and Management

Name/Number: 10054184

Total Records Found: 4

Start Date: Any Date

End Date: Any Date

Accounting Date	Sequence Num.	Tran Type	Fee Code	Fee Amount	Mailroom Date	Payment Method
01/28/2002	00000095	<u>1</u>	<u>101</u>	\$740.00	01/22/2002	DA 090447
01/28/2002	00000096	<u>1</u>	<u>103</u>	\$90.00	01/22/2002	DA 090447
07/22/2003	00000074	<u>1</u>	<u>1252</u>	\$410.00	07/21/2003	CK
09/03/2003	00000109	<u>1</u>	<u>1453</u>	\$1,300.00	09/02/2003	CK

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>11-25-03</u>		2 Serial/Patent # <u>10/054184</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
<input checked="" type="checkbox"/>	Extension of Time		7/21/03	\$ 410.00							
	Notice of Appeal/Appeal			\$							
	Petition			\$							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
			7 TOTAL AMOUNT OF REFUND								
			\$ 410.00								
8 TO BE REFUNDED BY:											
		Treasury Check									
		Credit Deposit A/C #:									
		9 <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px;">0</td> <td style="width: 20px;">9</td> <td style="width: 20px;">--</td> <td style="width: 20px;">0</td> <td style="width: 20px;">4</td> <td style="width: 20px;">4</td> <td style="width: 20px;">7</td> </tr> </table>			0	9	--	0	4	4	7
0	9	--	0	4	4	7					
10 REASON:											
	Overpayment										
	Duplicate Payment										
<input checked="" type="checkbox"/>	No Fee Due (Explanation):	<div style="text-align: center; font-size: 1.2em; margin-bottom: 10px;">untimely</div>									
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>Sherry D. Brinkley</u>		TITLE: <u>Petition Examiner</u>									
SIGNATURE: <u>Sherry D. Brinkley</u>		PHONE: <u>305-9282</u>									
OFFICE: <u>Petitions</u>											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: <u>Alisa Hill</u>		DATE: <u>11/26/03</u>									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance
Refund Branch**

Crustal Park One Room 202B